

SIGMA TAU

MEMBERSHIP RECORD

Chapter Sota Institution Colorado University Date October 26

Please print name

Name CYS Last Name RICHARD First Name LEE Middle Name Chapter Number 1878

College address 1150 College Street Boulder City Colo. State General Number 33857

Home address 2280 Kohler Street Boulder City Colo. State MEMBERSHIP: Active, ~~Alumnus~~
Strike out one

Course Chemical Engineer Year of Graduation 1966 Initiation date December 11, 1967

If alumnus, give University and degrees.....

Date of Birth 10-9-49 Place of Birth Boulder City Colorado State

Parent or Guardian's Name CYS Last Name JACK First Name

Parent or Guardian's Address 2280 Kohler Drive Street Boulder City Colorado State

John S. Faulkner Chapter Historian Afred M. Sanders Chapter President

Do not write below this line.

Chapter President will collect from Candidate the following amounts before initiation:

Shingle..... Key..... Pyramid..... Initiation.....

Permanent record.—Do not make carbon copy of this record.—Print all forms with ink.

Chapter officers will send all forms, properly filled in, to the National Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white sheet for the Chapter records. For full instructions see the inside cover of the record book.

Chapter officers will send all three forms, properly filled in, to the National Secretary-Treasurer as soon as possible after pledging. The National Secretary-Treasurer will return the white sheet for the Chapter records. For full instructions see the inside cover of the record book.

SIGMA TAU FRATERNITY

MEMBERSHIP RECORD

Chapter XI Institution The George Washington Univ. Date March 24, 1948

Please print name.

Name CZAJKOWSKI NORMAN — Chapter Number 314
Last Name First Name Middle Name

College address 7309 15TH PL. TAKOMA PK 12 17D General Number 13300
Street City State

Home address 203-17 34TH Ave BAYSIDE N.Y., N.Y. MEMBERSHIP: Active Honorary
Street City State Strike out one

Course TECH. ENG. Class JUNE '49 Date of Initiation APRIL 17, 1948
Year of Graduation Approximate

Date of Birth JUNE 25, 1920 Place of Birth PHILA. Penn.
City State

Parent or Guardian's Name CZAJKOWSKI John
Last Name First Name

Parent or Guardian's Address 203-17 34TH Ave BAYSIDE NEW YORK, N.Y.
Street City State

Robert W. Manville Will M. Heiser
Chapter Historian Chapter President
VICE

Do not write below this line.

Chapter President will collect from Candidate the following amounts before initiation:

Shingle	50c	Key	Tax -	1.00	Pyramid	\$4.00	Initiation	\$4.00
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PERMANENT RECORD — DO NOT TAKE A COPY OF THIS RECORD — PRINT ALL FORMS WITH INK.
Total \$6.00

Chapter officers will send all three forms, properly filled in, to the National Secretary-Treasurer as soon as possible after pledging. The National Secretary-Treasurer will return the white sheet for the Chapter records. For full instructions see the inside cover of the record book.

SIGMA TAU FRATERNITY

MEMBERSHIP RECORD

Chapter **PSI**

Institution **VofPH**

Date **MAY 14 1947**

Please print name

Name **CAMPOR** Edward P. Chapter Number **750**
Last Name First Name Middle Name

College address General Number **12454**

Home address Street **42 Inwood Ave** City **Trafford** PA State

MEMBERSHIP: Active, Honorary
Strike out one

Course **Elect. ENGR.** Class **1948** Date of Initiation **MAY 20 1947**
Year of Graduation

Date of Birth **19 Oct 1926** Place of Birth **Trafford** Penna. Approximate
City State

Parent or Guardian's Name **CAMPOR** FRANK First Name

Last Name

Parent or Guardian's Address Street **42 Inwood Ave** City **Trafford** PA State

W. Harold Finch, Jr.
Chapter Historian

John F. Reuther
Chapter President

Do not write below this line.

Chapter President will collect from Candidate the following amounts before initiation:

Shingle **50c** Key **\$5.50** Pyramid **\$4.00** Initiation **\$4.00**

Permanent record.—Do not make carbon copy of this record.—Print all forms with ink.

SIGMA TAU FRATERNITY

PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record — Print all four forms with ink — Do not type.

Chapter Upsilon

School University of Florida

DATE OF INITIATION March 19, 1967

MEMBERSHIP (Active or Alumnus) Active

Name Czerner, Richard Louis
Last Name Czerner First Name Richard Middle Name Louis

Chapter Number 1746

College address 12363 University Station, Gainesville, Florida
Street 12363 City Gainesville State Florida General Number 36726

Home address PO Box 977, Dade City, Florida 33525
Street PO Box 977 City Dade City State Florida Zip Code 33525

ACTIVE MEMBER Data: B.S. Degree in Chemical Engineering (Year of Graduation) (1967)
Course (in which degree will be granted)

ALUMNUS MEMBER Data:

B.S. Degree in Course School (Year Received)

M.S. Degree in Course School (Year Received)

Ph.D. Degree in Course School (Year Received)

Date of Birth Oct. 19, 1945 Place of Birth Tampa, Florida City Tampa State Florida

Name of Parent or Guardian Czerner, Frederick Henry
Last Name Czerner First Name Frederick Middle Name Henry

Address of Parent or Guardian PO Box 977, Dade City, Florida
Street PO Box 977 City Dade City State Florida

Charles D. Myers

Chapter Historian

Date Signed

J. S. R.
Chapter President

Chapter President will collect from Candidate the following amounts before initiation:

Shingle: \$1.00; Key: \$3.50; Pyramid (2 years): \$3.00; National Records: \$11.00; Total: \$18.50.

Chapter officers will send all four forms — properly and completely filled in — to the National Secretary-Treasurer as soon as possible after election.
The National Secretary-Treasurer will return the white form for the Chapter's permanent records.

DO NOT WRITE IN THIS SPACE

Chapter Number..... 662

General Number..... 41734

SIGMA TAU FRATERNITY

PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record—Print all four forms with ink.

Chapter PHI School UNIVERSITY OF AKRON

DATE OF INITIATION..... 5-27-71 Date of Birth..... 3-11-49

Name..... CZIRAKI	FRANK	MICHAEL
Last Name	First Name	Middle Name
College address..... 302 E. BUCHTEL	AKRON	OHIO
Street	City	State
Home address..... 120 E. CLINTON	AKRON	OHIO
Street	City	State

ACTIVE MEMBER Data: (Undergraduate and graduate students)

Bachelor's Degree in..... MECHANICAL ENGINEERING
Course (in which degree will be or was granted) (1972)
Year of Graduation

Graduate Degree in.....
Course (in which degree will be granted) (.....)
Year of Graduation

ALUMNUS MEMBER Data: (Engineering faculty or practicing engineer)

Bachelor's Degree in.....	Course	School	(.....)
Master's Degree in.....	Course	School	(.....)
Doctor's Degree in.....	Course	School	(.....)

Thomas R Bowen 5/4/71 Chapter Historian Date Signed Robert L Hood Chapter President

Chapter President will collect from each Candidate before initiation a fee of \$18.50 which shall include the cost of the key, the membership certificate, the Pyramid (2 years) and general service expense.

Send ALL FOUR FORMS—Completely filled in to Sigma Tau Fraternity, 204 Bancroft Hall, University of Nebraska, Lincoln, Nebr. 68508. The National Secretary-Treasurer will return the white copy for the Chapter's permanent records.

SIGMA TAU FRATERNITY

PERMANENT MEMBERSHIP RECORD

DO NOT WRITE IN THIS SPACE

Chapter Number..... 662

General Number..... 41734

Do not make carbon copy of this record—Print all four forms with ink.

Chapter PH1 School UNIVERSITY OF AKRON

DATE OF INITIATION..... 5-27-71 Date of Birth..... 3-11-49

Name..... CZIRAKI	FRANK	MICHAEL
Last Name	First Name	Middle Name
College address..... 302 E. BUCHTEL	AKRON	44304
Street	City	Zip Code
Home address..... 120 E. CLINTON	AKRON	44301
Street	City	Zip Code

ACTIVE MEMBER Data: (Undergraduate and graduate students)

Bachelor's Degree in..... MECHANICAL ENGINEERING (1972) Year of Graduation
Course (in which degree will be or was granted)

Graduate Degree in..... (.....) Year of Graduation
Course (in which degree will be granted)

ALUMNUS MEMBER Data: (Engineering faculty or practicing engineer)

Bachelor's Degree in.....	Course	School	(.....) Year Received
Master's Degree in.....	Course	School	(.....) Year Received
Doctor's Degree in.....	Course	School	(.....) Year Received

Thomas R Bowen..... 5/4/71..... Robert L Hood.....
Chapter Historian Date Signed Chapter President

Chapter President will collect from each Candidate before initiation a fee of \$18.50 which shall include the cost of the key, the membership certificate, the Pyramid (2 years) and general service expense.

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SIGMA TAU FRATERNITY

MEMBERSHIP RECORD

Chapter MU Institution University of Oklahoma Date April - 13 - 50

Please print name

Name Czirr Last Name Don First Name W Middle Name Chapter Number 1193

College address Cleveland H. Street Norman City OKla State General Number 16696

Home address 1 Crescent Street OKlahoma City State MEMBERSHIP: Active, Honorary
Strike out one

Course Petroleum Eng. Class 1950 Year of Graduation Date of Initiation April - 1950 Approximate

Date of Birth Aug - 12 - 1928 Place of Birth Kendrick City OKlahoma State

Parent or Guardian's Name Hopkins Last Name Opal First Name

Parent or Guardian's Address Crescent Street OKlahoma City State

English Piper Chapter Historian Chapter President John T Warter

Do not write below this line.

Chapter President will collect from Candidate the following amounts before initiation:

Shingle.....	<u>75c</u>	Key.....	<u>\$5.00</u>	Pyramid.....	<u>\$4.00</u>	Initiation.....	<u>\$4.00</u>
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Permanent record. Do not make carbon copy of this record.—Print all forms with ink.

Total \$6.00

SIGMA TAU FRATERNITY

PERMANENT MEMBERSHIP RECORD

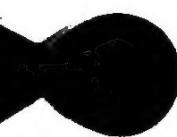
Do not make carbon copy of this record — Print all four forms with ink — Do not type.

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Chapter	PSI			School	UNIVERSITY OF PITTSBURGH		
DATE OF INITIATION	11-20-67			MEMBERSHIP (Active or Alumnus)	ACTIVE		
Name	CZUJKO	RAYMOND		PAUL	Chapter Number	1879	
Last Name	First Name	Middle Name					
College address	5717	HOWE ST.	PIT.	15232 PA	General Number	37679	
Street	City	State					
Home address	SAME	Street	City	State	Zip Code		
ACTIVE MEMBER Data: B.S. Degree in	INDUSTRIAL ENGR.			Course (in which degree will be granted)	('67)		
ALUMNUS MEMBER Data:							
B.S. Degree in	Course	School	(.....)				
M.S. Degree in	Course	School	(.....)				
Ph.D. Degree in	Course	School	(.....)				
Date of Birth	10-5-45	Place of Birth	PITTSBURGH	City	PA	State	
Name of Parent or Guardian	CZUJKO	Last Name	JULIUS	First Name	Middle Name		
Address of Parent or Guardian	419	VALLEY DRIVE	P.O.T.L. 15215	City	PA	State	
Chapter Historian	11-20-67			Date Signed	Albert Rocchini		
Chapter President							

Chapter President will collect from Candidate the following amounts before initiation:

Shingle: \$1.00; Key: \$3.50; Pyramid (2 years): \$3.00; National Records: \$11.00; Total: \$18.50.



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